



# State of Louisiana

Louisiana Department of Health  
Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

October 30, 2019

Karen Matthews,  
Health and Human Services Director  
Chitimacha Health Clinic  
P.O. Box 640  
Charenton, LA 70523

Angela Martin  
Chitimacha Tribe of Louisiana  
P. O. Box 640  
Charenton, LA 70523

Mildred Darden, Clinic Office Supervisor  
Chitimacha Tribe of Louisiana  
P. O. Box 640  
Charenton, LA 70523

Marshall Pierite, Chairman  
Carl Chapman, Health Director  
Tunica-Biloxi Tribe of Louisiana  
P. O. Box 1589  
Marksville, LA 71351-1589

Mr. Earl Evans, Tribal Administrator  
Tunica-Biloxi Tribe of Louisiana  
P. O. Box 1589  
Marksville, LA 71351-1589

David Sickey, Chairman  
Paula Manuel, Health Director  
Coushatta Tribe of Louisiana  
P. O. Box 818  
Elton, LA 70532

Chief Beverly Cheryl Smith  
Kellye Smith, Health Director  
The Jena Band of Choctaw Indians  
P. O. Box 14  
Jena, LA 71342

Dear Louisiana Tribal Contact:

**RE: Notification of Louisiana Medicaid State Plan Amendments**

In compliance with the provisions of the American Recovery and Reinvestment Act (ARRA) of 2009, the Louisiana Department of Health, Bureau of Health Services Financing is taking the opportunity to notify you of State Plan amendments (SPAs) that may have an impact on your tribe.

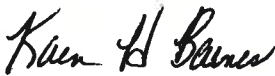
Attached for your review and comments is a summary of the proposed SPAs. Please provide any comments you may have by **November 29, 2019**, to Karen Barnes via email at [Karen.Barnes@la.gov](mailto:Karen.Barnes@la.gov) or by postal mail to:

Louisiana Department of Health  
Bureau of Health Services Financing  
Medicaid Policy and Compliance  
P.O. Box 91030  
Baton Rouge, LA 70821-9030

Should you have additional questions about Medicaid policy, Mrs. Barnes will be glad to assist you. You may contact her via email at the email address above or via telephone at (225) 342-3881.

Thank you for your continued support of the tribal consultation process.

Sincerely,



*fol* Jen Steele  
Medicaid Director

Attachment (1)

JS/KHB/MVJ

c: Billy B. Farrell  
Tobias Griffin  
Stacey Shuman

**State Plan Amendments for Submittal to CMS**  
**Request for Tribal Comments**  
**October 30, 2019**

**Pharmacy Benefits Management Program - Dispense as Written Electronic Prescribing**

**Effective date: January 20, 2020**

The purpose of this SPA is to amend the provisions governing the Pharmacy Benefits Management Program in order to allow notation of the medical necessity of brand drugs using electronic prescriptions, to allow the state to pursue outcomes-based agreements with manufacturers, and to align the provisions with the current Medicaid State Plan.

**Treatment for Opioid Use Disorder in Opioid Treatment Programs**

**Effective date: January 20, 2020**

The purpose of this SPA is to adopt provisions governing medication-assisted opioid use disorder (OUD) treatment in Opioid Treatment Programs, for Medicaid-eligible recipients ages 18 and over, diagnosed with OUD.

**Intermediate Care Facilities for Persons with Intellectual Disabilities Dedicated Program Funding Pool Payments**

**Effective date: January 20, 2020**

The purpose of this SPA is to adopt provisions governing reimbursement to non-state intermediate care facilities for persons with disabilities to allow one-time, lump sum payments from the dedicated program funding pool.